

# **MAPOC Informational Hearing**



## **ConneCT: Implementation Update**

Department of Social Services  
February 14, 2014



## ConneCT Implementation Update

2/2014

### Key Messages:

- ConneCT is motivated by an interest in *expanding access* and *quality of service* for applicants and beneficiaries of DSS programs
- ConneCT roll-out has been challenging
- DSS is actively intervening to support full functionality of ConneCT

# ConneCT Update



Problem with redetermination process for Medicaid

Dear Commissioner:

I'm sorry to bother you with this problem, but I at this point I don't know where to turn. Possibly you can forward this email to someone who might be able to help, or you can help yourself.

This has been a month's long problem. When my Medicaid services were close to review, I received and sent the redetermination form and all the documents required. I assumed that all was fine until I received a letter telling me that they had not received my redetermination information, and giving me a deadline for being dropped from the program. I filled out a new redetermination form, gathered all the documents required, and resent it. I had heard nothing until I went to one of my standing doctors appointment and was told that I was no longer covered, and was unceremoniously sent away. I called my worker, \*\*\*\*\*, and was told that he was no longer my worker, that my new worker was \*\*\*\*\*, but there was no record in the computer of my second set of forms and documents being received. I have now sent a third set.

I have tried to contact \*\*\*\*\*, to no avail, I have tried to contact his supervisor, to no avail. I have contacted my State Senator, who has promised to try to contact someone about my problem.

Please help me!



**ConneCT  
Implementation  
Update**

**2/2014**

- **Why ConneCT**
- **Status of ConneCT Implementation**
- **Implementation Challenges**
- **Further Interventions to Support Functionality**



## ConneCT Update 1/2014

Why ConneCT?

Status of ConneCT  
Implementation

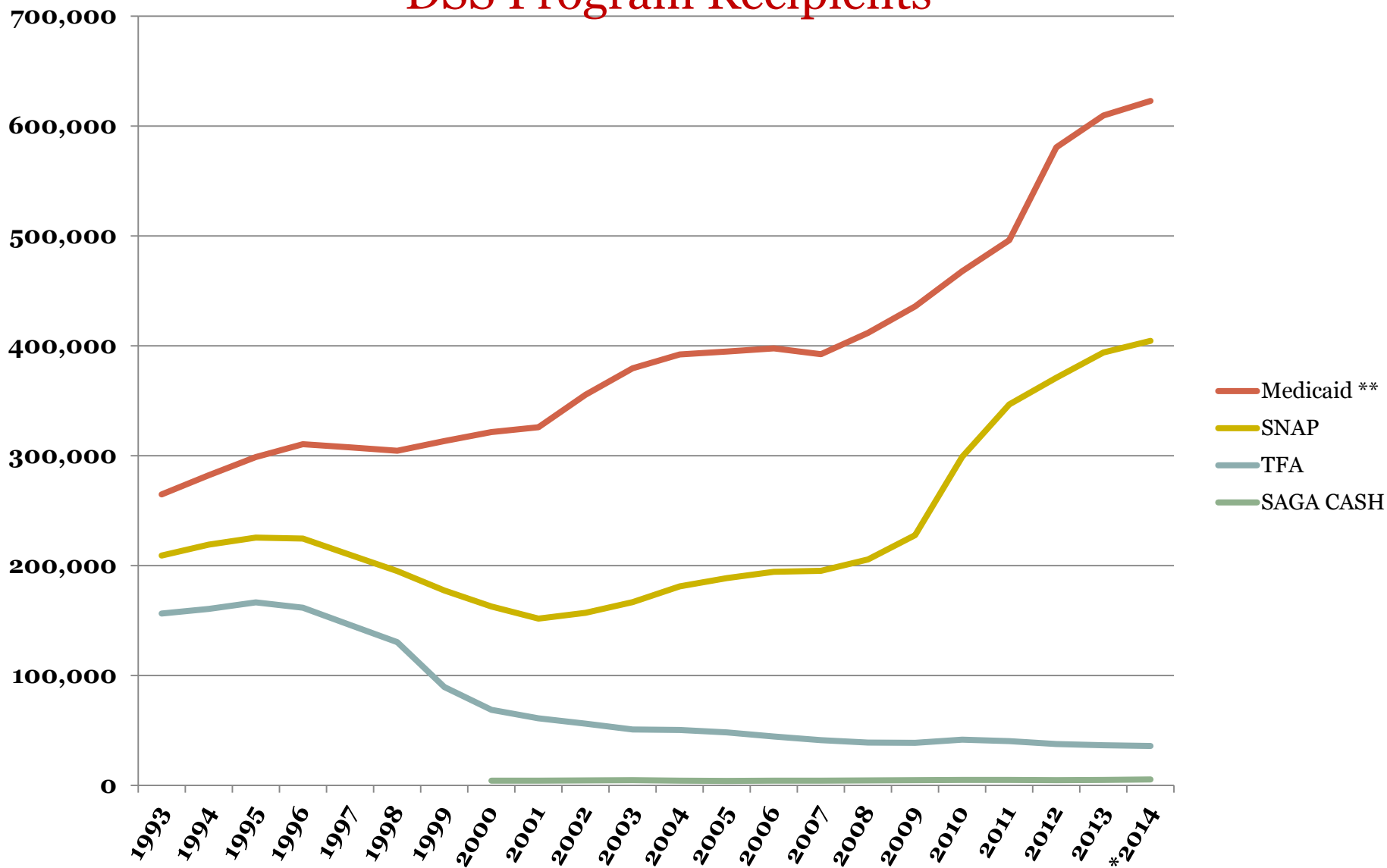
Implementation  
Challenges

Further Interventions  
to Support  
Functionality

## What Motivated ConneCT?

- Historical barriers faced by consumers in accessing and being served by DSS
- Dramatic increase in demands for assistance from DSS programs due to the Great Recession
- 20+year old legacy system (EMS) and obsolete telephone systems were incapable of supporting increasing assistance demands.

# DSS Program Recipients

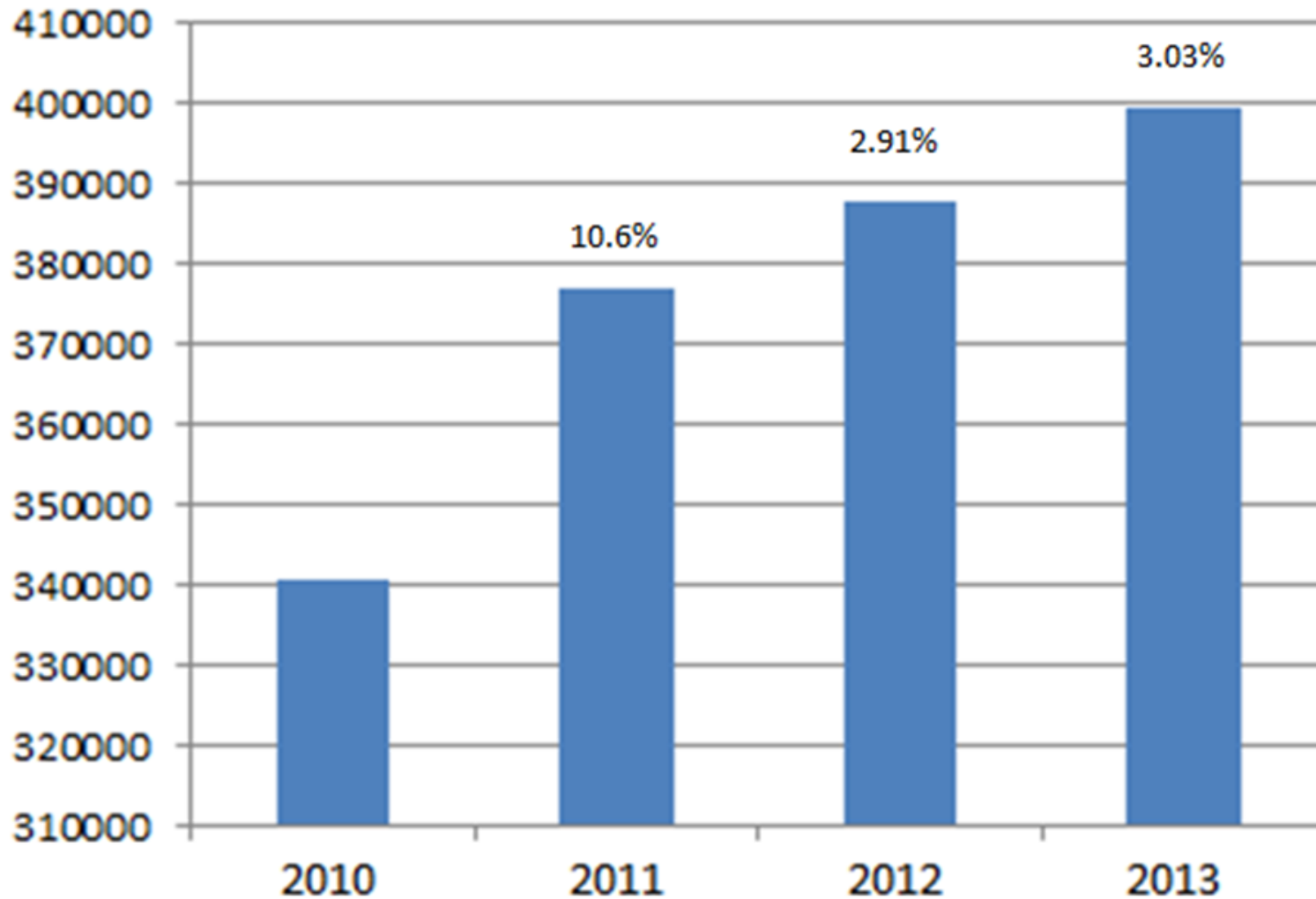


\* 2014 data represents a monthly average of the six months from July 2013 to December 2013

\*\* SFY2012-2013: Total Medicaid includes State Supplement, Medicaid Family, Medicaid ABD, Medicaid LTC, and Medicaid LIA;  
SFY2005-2011: Total Medicaid includes State Supplement, Medicaid Family, Medicaid ABD, and Medicaid LTC.

# State-wide Walk In Traffic

2010 - 2013





## ConneCT Update 1/2014

Why ConneCT?

Status of ConneCT  
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to Support  
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## Why is ConneCT designed as it is?

- ConneCT is designed to take advantage of the latest technology
- ConneCT is designed to expand means of access: online, by telephone, and in person
- ConneCT is designed to focus on access by, and privacy protections for people who receive benefits.



## ConneCT Update 1/2014

Why ConneCT?

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Major components of ConneCT have been implemented and are fully operational:

- One statewide, toll-free number
  - Integrated Voice Response System
  - Three Benefits Centers
- “My Account” online feature
- “Am I Eligible” screening tool

Operational challenges associated with these will be discussed later.



## ConneCT Update 1/2014

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## One statewide, toll-free number

- For the first time, a single number to reach DSS, 24 hours per day, seven days per week.
- **1-855-6-CONNECT**
- Provides accommodation for those with disabilities and non-English language speakers.



## ConneCT Update 1/2014

Why ConneCT?

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# Integrated Voice Response (IVR) System

- Enables support for individuals on a 24-hour, seven day per week basis (including weekends and holidays)
- Safeguards customer privacy through use of confidential PIN numbers



## ConneCT Update 1/2014

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## Three Benefits Centers

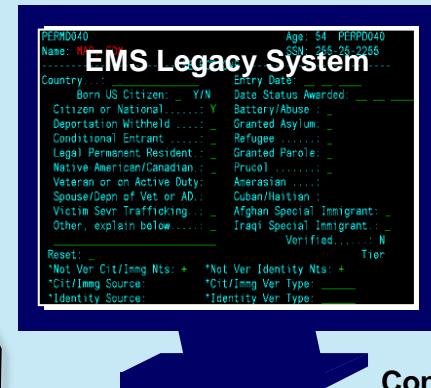
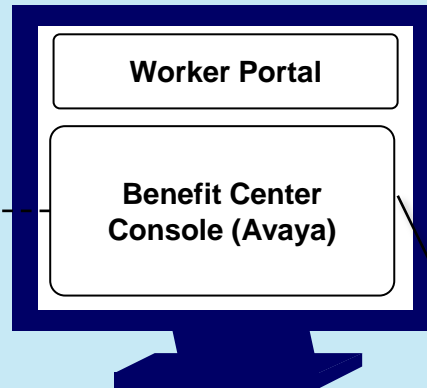
- Telephone support for all individuals seeking assistance by telephone
- Centers were designed to answer questions and to update applicant and beneficiary information

Due to ConneCT operational challenges, Centers are pressed beyond the original design to support extensive application and re-determination activity.

# Benefit Center Functional Overview



Benefit Center  
Worker  
and Supervisors



**ConneCT Screen Pop**



Benefit Center Phone (VoIP)

## Office Wall Boards

*Display Agent Status and Max Call Wait Time (Configurable)*



ConneCT Client Information

**State of CT DSS Client Information**

Client ID: 001006303

Verified: Yes Language: English

Name: Aanderud, Leila

Call Reason: App\_Benefit\_Doc

Calling Number: (800) 555-1212

Program Info

Medicaid for Children: HoH: Active: 9468819

Medicare Savings Program: HoH: Active: 50093362

Reminder: This information is also available at [connect.ct.gov](http://connect.ct.gov)

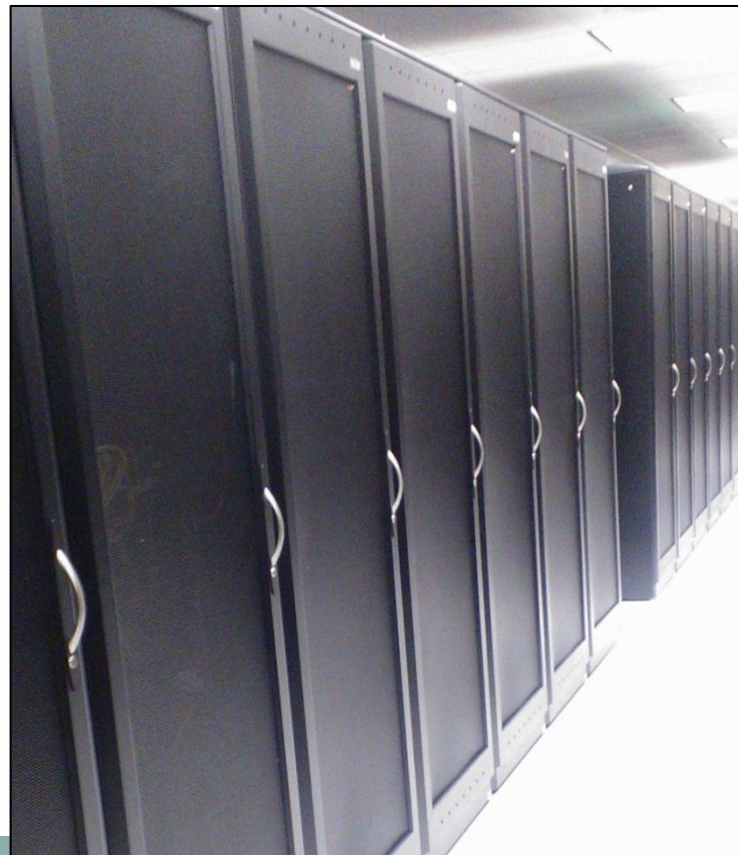
Done

# Benefit Center Technical Overview



It takes a lot of technical planning to make the phone “ring”...

New Telephony Server Stack at CT Data Center



Technical Milestone	Benefit to DSS
✓ Built and deployed new server infrastructure.	Allows data center to host a modern web-based system for DSS.
✓ Installed new telephone system at data center and at three DSS offices.	Single, centralized telephony platform enables a state-wide workforce and provides redundancy.
✓ Installed new optical fiber network.	Enables high-speed connectivity between the data center and DSS benefit center offices to support voice and data.
✓ Installed 700 new telephone lines at the data center.	Allows DSS customers to reach DSS via a central location and access telephony services.



## ConneCT Update 1/2014

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## “My Account” online feature

- Enables customers to check on the status of applications and re-determinations of benefits using a secure, personal web page.
- Provides a summary for each individual of **all DSS benefits** for which eligible



## ConneCT Update 1/2014

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# “Am I Eligible” Screening Tool

- Enables any individual, at any time and anywhere, to confidentially screen him or herself for eligibility for **all DSS benefits**
- Does not require disclosure of personal information
- Provides a summary for each individual of all benefits for which eligible



## ConneCT Update 1/2014

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## ConneCT at a glance . . .

- On a typical day:
  - 11,162 people call the toll-free number
  - 4,356 use the Integrated Voice Response System
  - Average wait time of 54 minutes before speaking with an eligibility services worker.
  - People typically leave the queue after waiting 21 minutes for an eligibility services worker.



## ConneCT Update 1/2014

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## ConneCT at a glance . . .

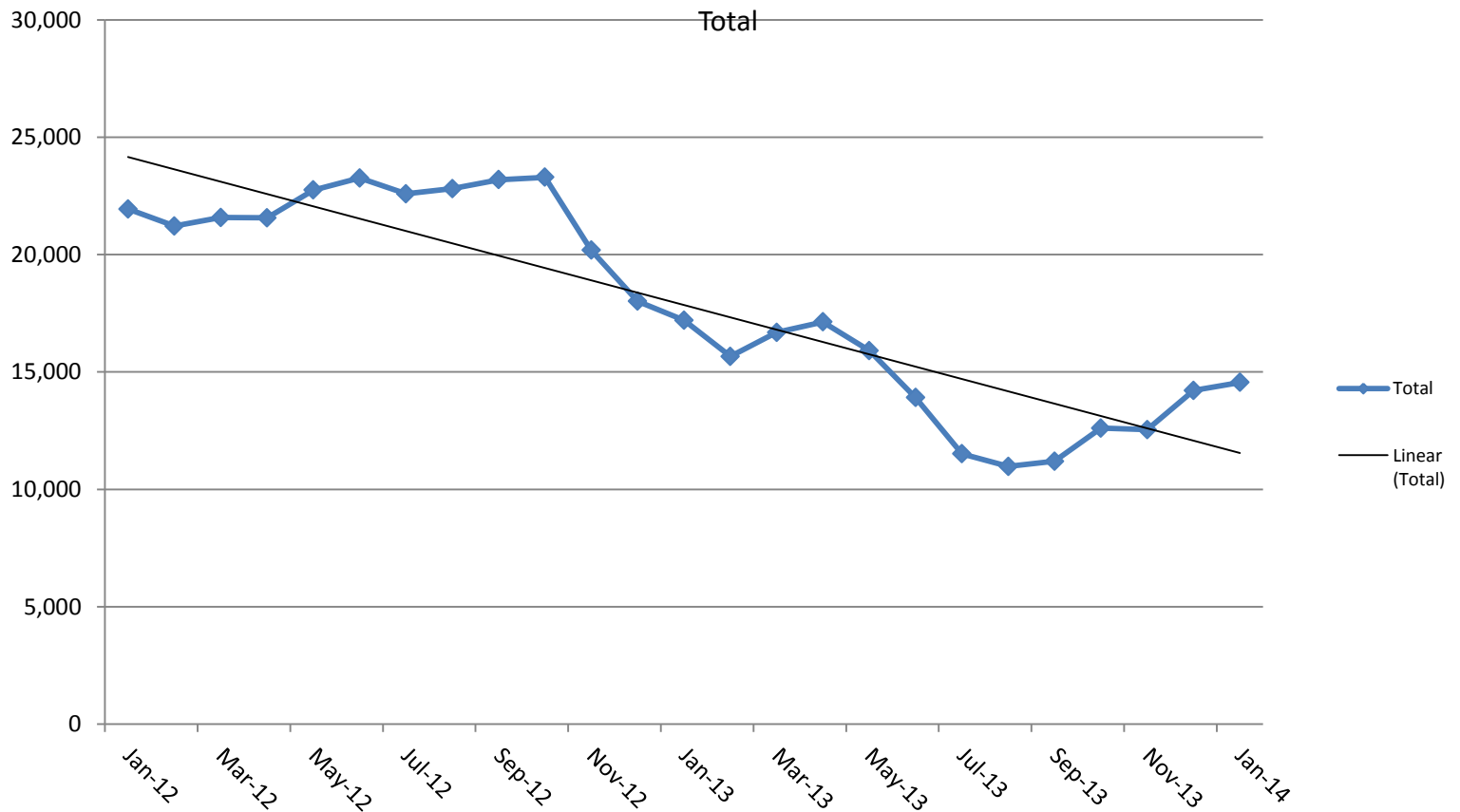
- At launch of ConneCT, DSS had on hand some **200,000** pieces of unprocessed work. Today, there are fewer than **3,000**.
- DSS has significantly improved the timeliness of its processing of applications.

# ConneCT - *Early Results*

“My Account”		59,031	Online client accounts created since implementation
Pre-Screening		43,701	Times screen completed since implementation
IVR Phone Account		104,383	Phone client accounts created since implementation
Benefit Center		331,897	Calls reaching worker since implementation
Document Scanning and Workflow		3,854,526	Documents scanned since implementation
Online Applications		Pending	Online applications since implementation
Online Change Reporting		Pending	Online changes since implementation

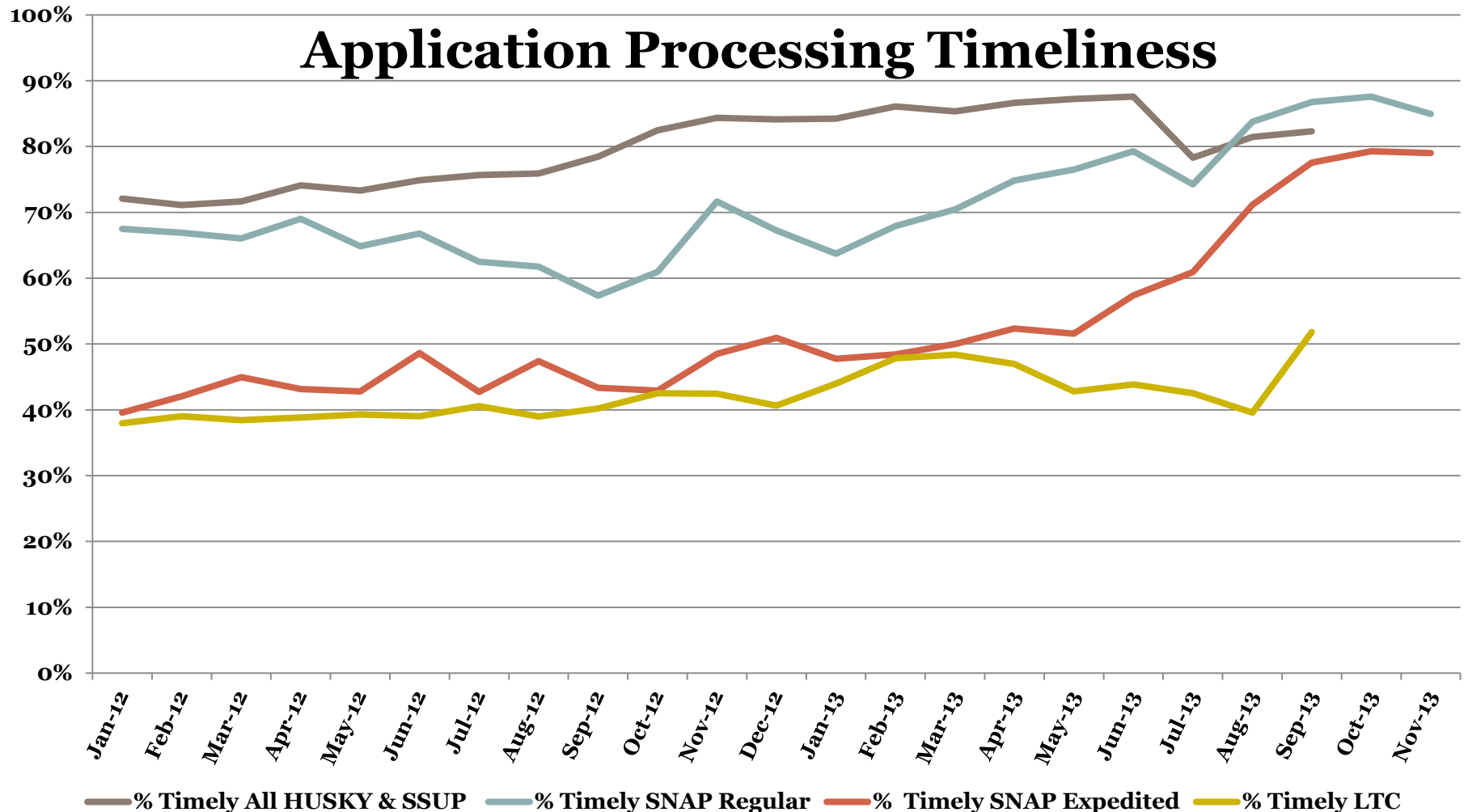
# ConneCT - *Early Results*

## Total Pending Applications



# ConneCT - *Early Results*

## Application Processing Timeliness



# ConneCT - Release Overview

	Functional Overview	Status / Target Date
Client Accounts	Provides secure, anytime access to generic and case-specific information to clients via the Internet.	Currently Live ( <a href="http://connect.ct.gov">http://connect.ct.gov</a> )
Pre-Screening	Allows clients to independently check for potential eligibility online without having to visit or call DSS.	Currently Live ( <a href="http://connect.ct.gov">http://connect.ct.gov</a> )
Interactive Voice Response (IVR)	Provides secure, anytime access to generic and case-specific information to clients by phone.	Currently Live
Document Management and Workflow	Reduces the need for paper-based processing and provides centralized access to documents and visibility into document status.	Currently Live
Benefit Center	Provides a centralized, consistent enterprise system for receiving and servicing incoming calls.	Currently Live
Online Application	Allows clients to apply online and provides a dynamic verification checklist to clearly explain what verification is required.	Soft Launch 12/13
Change Reporting and Online Redeterminations	Allows clients to report changes and conduct redeterminations online.	Soft Launch 1Q 2014



## ConneCT Update 2/2014

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## Key Implementation Challenges

- Recruitment, training and deployment of new staff took time
- Scanning capacity was initially inadequate to meet the need
- Document tracking within system took time to implement
- IT functionality has also required significant effort
- Long-term care did not fit well within the design for application processing
- Providers and customer representatives are frustrated by the individualized design of ConneCT



## ConneCT Update 2/2014

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## New Staff

- On 1/1/2012, DSS had 104 fewer staff than in 2008
- Since 1/1/2012, **220** new eligibility positions have been added
- It takes about six months from date of hire to deploy a new fully trained staff person



## ConneCT Update 2/2014

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## Scanning Capacity

- Initially, Scan Optics did not have sufficient scanning capacity to meet the rate of intake of faxed documents
- At DSS direction, ScanOptics corrected this in August and have been meeting contract expectations. There is no backlog.



## ConneCT Update 2/2014

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## Document Tracking

- Initial challenges with tracking scanned documents within ConneCT have been remedied.
- DSS and Deloitte are continuing to review tracking of documents to support timely processing of applications and re-determinations
- Further, refinements of ConneCT now permit eligibility workers to track documents in queues for applications and re-determinations for benefits



## ConneCT Update 2/2014

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## IT Functionality

- IT functionality has also been a challenge
- System stability has not yet been achieved
- DSS, BEST, Access Health and contractor Deloitte have teams working specifically with IBM, et. al. to track and improve functionality



## ConneCT Update 2/2014

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# Long-Term Care Applications

- Long-term care (LTC) did not fit well within the design for application processing
- Effective in November, 2013, DSS changed course and directed that paper copies of LTC applications be directed to three regional hubs
- This has considerably improved functionality



## ConneCT Update 2/2014

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## Provider/Community Service Partner Access

- Providers and representatives historically offered extensive support to customers with applications and re-determinations. ConneCT is designed to empower individual consumers to support themselves, and does not enable access by providers.
- All of the above strategies will continue to improve support for consumers.
- DSS is currently assessing the feasibility of addressing provider requests for escalated review of urgent situations and information on multiple clients, while maintaining client confidentiality



## ConneCT Update 2/2014

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## Further Interventions:

- Implementation of a means of escalation in situations of urgent need
- Roll-out of online application feature
- Implementation of automatic extension of re-determinations



## ConneCT Update 2/2014

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## Further Interventions:

- Outbound assistance with redeterminations process.
- Roll-out of online application feature
- Identification management



# ConneCT Update 2/2014

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# Replacing EMS

## ***Current situation:***

- People must apply for each benefit program separately.
  - Duplication of effort and increased cost to the state.
  - Frustration and confusion as a result of **notices** from EMS.
- 
- Delays in benefits.
  - Lapses in benefits.

# Replacing EMS – *What the future holds*

- Planned integrated eligibility initiative that will create a “**single front door**” to all CT’s human service programs.
- Integrated eligibility platform
  - Facilitate cost-effective information sharing across Connecticut’s HHS enterprise, supporting improved operations and performance.
  - Flexible business rules engine and other service components will create a system that is agile.
  - Facilitates the ability for the state to respond to changing federal and state health care coverage and program eligibility policies.

# Replacing EMS – *What the future holds*

## Integrated Eligibility

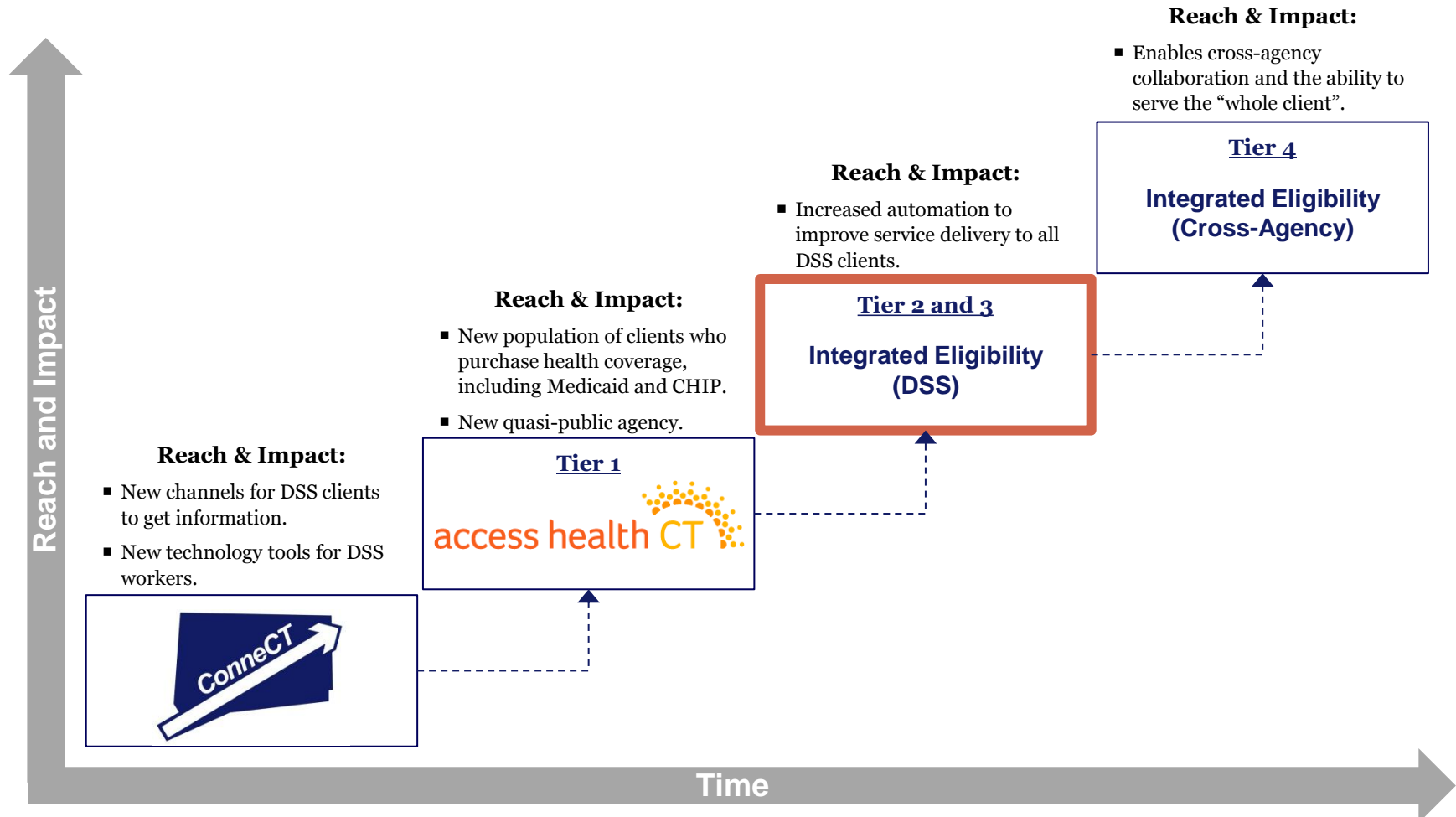
- Effective January 1, 2014, Affordable Care Act:

Requires states to operate a website that links the Health Insurance Exchange (Access Health CT), Medicaid, and Children's Health Insurance Program (CHIP) and permits individuals to compare available health coverage options and apply for or renew such coverage.

# Replacing EMS – *What the future holds*

- A “no wrong door” approach provides access to Health Insurance Exchange services as well as to non-MAGI Medicaid, SNAP, and Temporary Family Assistance (TFA)-related services and data
- This will be facilitated by a single shared eligibility service used by both the Exchange and DSS to determine eligibility for Medicaid, CHIP, Advance Premium Tax Credits & Cost Sharing Reductions (APTC/CSR), as well as non-health public assistance programs such as SNAP and TFA

# Planned series of milestones, starting with ConneCT



**These projects build on each successful milestone to increase reach and impact.**

# Redetermination Process



- Non-MAGI - Marva Perrin, Deputy Director  
Field Operations Division
- MAGI – Kristin Dowty, DSS Business Lead  
AccessHealth CT Project

# Redeterminations



- Regular Periodic reviews
- Continuous participation
- Review of all factors relating to:
  - Need
  - Eligibility
  - Benefit level
  - Recipient-agency responsibilities
  - Circumstances subject to change, unclear or questionable
- Employs same Eligibility rules and methodology as time of application

# Redeterminations



- Referred to by different names in different programs:

- ✦ SNAP

Recertification



- ✦ Husky Medical

Renewals

- Forms W-1ER and W1-ERs; QMB

# Redetermination Processing



- Mail-in vs Walk-in
- Face-to-face required?
- Interview needed?

# Redeterminations Processing Cont'd



## Interview Required

- SAGA Cash
- SNAP
- TFA

## No interview Required

- All Medicaid
- State Supplement

# Redetermination Period?



- Correspond to calendar months
- Same for all programs, except Medical
- Redetermination period End Date

# Redetermination Periods



<u>Assistance Unit (Type)</u>	<u>Standard Redetermination Period</u>
<b>Medicaid</b> (Non-SpendDown)	12 Months
<b>Medicaid</b> (SpendDown)	6 Months
<b>SNAP</b>	12 Months
<b>SNAP</b> (Elderly or disabled, if no earnings)	24 Months
<b>SNAP Expedited</b> (if application date is prior to 16 <sup>th</sup> day of the month)	1 Month
<b>SNAP Expedited</b> (if application date is prior to 16 <sup>th</sup> day of the month)	2 Months

**EMS** is programmed to schedule the appropriate redetermination cycles

# Redetermination Processing Timeline



- **Total time to completion**

Approximately two months

## Example

**Redetermination End Date 02/28/2014**

Redetermination notice and  
form mailed...

12/25/2013

DSS must

- Receive completed form in-office/ConneCT
- Initiate Redetermination prior to 2/15/13
- Complete interview (if needed) and Process work prior to...

02/26/2014 (Month End)

# ConneCT and Redeterminations



- Process Task Type vs Program Type
- ConneCT Workpools
  - ✦ General Applications
  - ✦ General Redeterminations
  - ✦ General Changes
  - ✦ W-1348s
- Assigned Profiles

# ConneCT and Redeterminations



- Redetermination Processing and ConneCT
  - ✦ Scanning and Indexing
  - ✦ First in, First out
  
- Queued Redetermination Documents – DSS strategies
  - ✦ Linking forms in ConneCT with EMS Redetermination End Dates
  - ✦ Auto-Initiation of Redeterminations

# MAGI Redetermination Process



- According to ACA, effective 1/1/14 the eligibility rules for children, parents & caretakers, pregnant women and low income adults are based on modified adjusted gross income (MAGI) rules. (HUSKY A, B and D)
- The ACA prohibits states from discontinuing assistance solely due to the use of MAGI rules until 3/31/14 or the next redetermination, whichever is later.

# MAGI Redetermination Process



- To reduce the impact of the change to MAGI, CT received federal authority to delay redeterminations.
- Redeterminations for most HUSKY A, B and D households were delayed 3 months.
- Transitional medical assistance groups and spend-down groups could not be delayed.

# MAGI Redetermination Process



- DSS sent a targeted mailing to affected clients in late December 2013 explaining that redeterminations would be delayed.
- DSS and AHCT now share a common computer system that determines MAGI HUSKY as well as MAGI tax credit eligibility.
- All redetermination notices explain the process has changed and can be completed by going online, completing a phone application or by mailing in the new shared AHCT/DSS application included in the mailing.

# MAGI Redetermination Process



- On-line and Phone redeterminations are the most expedient and result in an immediate eligibility decision.
  - Some post-eligibility verifications may be needed if information is not matched against the federal data services hub or other sources.
  - 90 days of coverage is provided while verification documentation is requested and reviewed.
- Paper applications are mailed to AHCT via Scan Optics where they are later accessed by Xerox State Health Care workers who data enter the information from the paper into the AHCT/DSS share eligibility system.

# MAGI Redetermination Process



- Xerox workers data enter the final eligibility decision rendered by the shared AHCT/DSS eligibility system into the EMS system (Medicaid) and the ConneXion system (HUSKY B) to leverage the case management functionality that does not currently exist in the new system.
- This is a temporary procedure necessary until the full implementation of the new ImpaCT system by 2016.
- 2015 MAGI redeterminations will be processed in the new AHCT/DSS shared system and will be subject to administrative renewal procedures.
  - Information will be reviewed electronically in advance of closure. Clients whose data continues to match that verified against electronic sources will remain enrolled while others may need to provide verification of data that has changed.

# Transforming Our Business



**ImpaCT  
Integrated Eligibility  
System**  
December 2015

*Optimizing the  
Infrastructure*

*Using Measures to Create Agility*

*Measuring Quality and Timeliness*

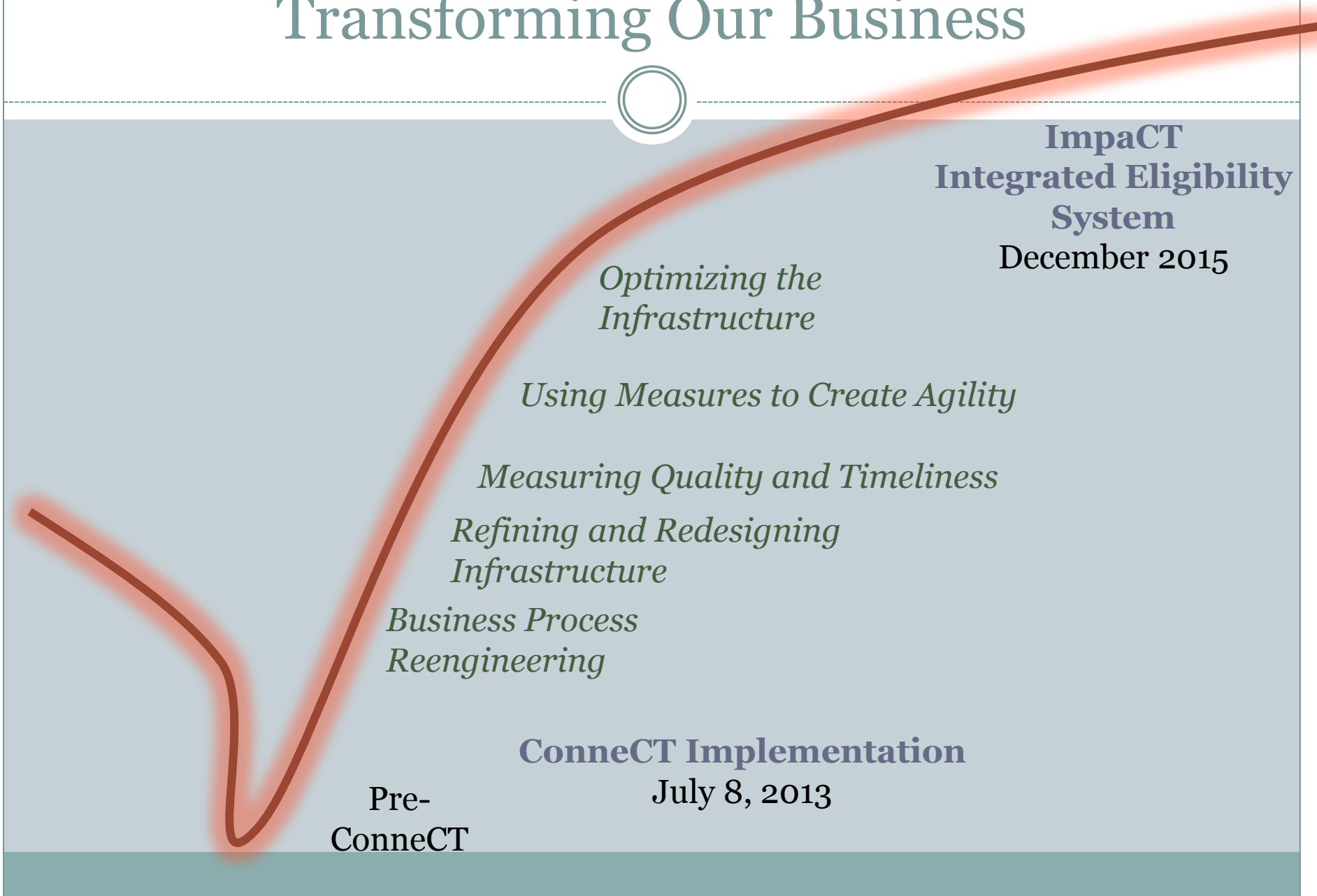
*Refining and Redesigning  
Infrastructure*

*Business Process  
Reengineering*

**ConneCT Implementation**

July 8, 2013

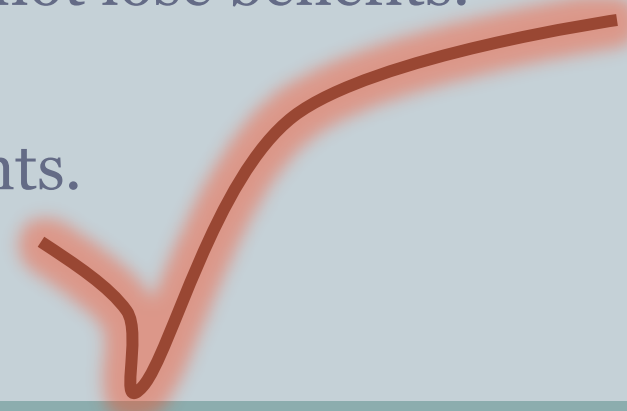
Pre-  
ConneCT



# Transforming Our Business



- With the Implementation of ConneCT – We Are Increasing Value
  - Paperwork is not lost.
  - Timeliness is improving.
  - Restructuring LTC process - hubs.
  - Initiate redeterminations so people do not lose benefits.
  - Hired staff.
  - Daily and weekly progress measurements.

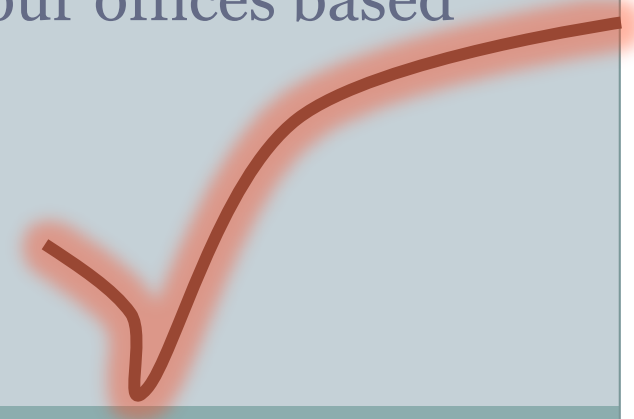


# Transforming Our Business



- **Moving On the Curve**

- Accuracy has improved.
- People can reach us in person, by phone, and online.
- People can ConneCT with us on weekends and after hours with MyAccount online or with the IVR.
- Standardized business practice across our offices based upon efficiency modeling.



# Transforming Our Business



- **There Is More To Do**

- Auto initiate redeterminations
  - ✦ Prevent people who have sent in documents from going off assistance.
- Hiring staff.
  - ✦ More staff to process work and serve people.
- Reviewing augmentation of the Interactive Voice Response (IVR).
  - ✦ Reduce wait times.
- Optimize ConneCT.
  - ✦ Insure full system availability to process work.
- Stand up escalation unit for partner organizations

